Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

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Establishment Name GRANTLINE MARATHON				Telephone Number Est 812-948-8101	Date of Inspection	ID#	
Address 3309 GRANTLINE ROAD, NEW ALBANY IN 47150				Own 812-447-3973	08/11/2020		
Owner				Purpose	Follow Up	Released	
MIKE SINGH				X Routine	08/18/2020	08/21/2020	
Owner's Address				 Follow-up			
3309 GRANTLINE ROAD NEW ALBANY, IN 47150-				Complaint			
Person in Charge AMRI SINGH				Pre-Operational			
Responsible Person's Email				Temporary	Menu Type		
•				HACCP	1 <u>X</u> 2 <u> 3 </u>	4 _ 5 _	
Certified Food Handler				Other (list)			
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"							
Section # C NC R Narrative To Be Corrected							
116	X	Observed employe	e failing to wear manda	ted face covering per Indiana	TODAY	0110000	
	Α	Back On Track Co	_	idated face covering per indiana			
177	Х		Observed product stored on lobby floor			TODAY	
245	Χ	Observed rags allo	Observed rags allowed to dry throughout checkout area			TODAY	
297	Х	Observed lobby co soiled	Observed lobby coffee filter bulb and surrounding area to be rusted and TODAY				
297	Χ		Observed BOH bulk ice machine to be moldy			TODAY	
346	Χ	Observed no hands	Observed no handsoap available at employee restroom.			TODAY	
347	Χ	Observed no hand	Observed no hand towels available at checkout handsink			TODAY	
392	Х	Observed dumpste	Observed dumpster to be left open			TODAY	
Summary of Viola	ations	C <u>0</u> NC	8 R <u>0</u>				
Received by (name and title printed):				Inspected by (name and title printed):			
AMRI SINGH				A.J. Ingram CHIEF FOOD SPECIALIST			
Received by (signature):				Inspected by (signature):			
cc:			cc:	1	cc:		